## P98000077385

(Re	equestor's Name)	
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<b>,</b>	,	
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FALLAHASSEE, FLORES.

AHA No Observed

## **COVER LETTER**

Division of Corporations
SUBJECT: MONALISA FINE JEWELRY, INC. (Name of Corporation)
(ivalue of Colporation)
DOCUMENT NUMBER: P98000077385
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ALEXANDER EYNIS
(Name of Contact Person)
4.77.00.1837.4.7.1.4347
ATTORNEY AT LAW (Firm/Company)
(1 mil company)
20801 BISCAYNE BLVD, SUITE 403
(Address)
AVENTURA, FL 33180
(City/State and Zip Code)
For further information concerning this matter, please call:
ALEXANDER EYNIS, ATTORNEY at ( 305 ) 935-4079
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:
Amendment Section Amendment Section
Division of Corporations Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.050 statement of change is submitted for a corporation organ in order to change its registered office or regist	nized under the laws of the State of <u>F</u> L	ORIDA		
1. The name of the corporation: MONALISA FINE JE	WELRY, INC.			
2. The principal office address: 1666 SOUTH FEDER	RAL HWY, DELRAY BEACH, FL	33483		
3. The mailing address (if different):				
4. Date of incorporation/qualification: 09/08/1998	Document number: P980000	77385		
5. The name and street address of the current registered a Florida Department of State:	ngent and registered office on file with	the		
ARTHUR KHAYTOV				
1666 SOUTH FEDERAL H	IWY			
DELRAY BEACH, FL 33483	3	Zv	06	
6. The name and street address of the new registered ages (if changed):	nt (if changed) and /or registered office	ECIRETAI	001	<u> </u>
LARISSA RISSINE		RY O	24	
1666 SOUTH FEDERAL H		FST	PM 9:	O
(P.O. Box NOT acceptable DELRAY BEACH, FL 3348	•		=	
The street address of its registered office and the street as changed will be identical.		egistered	l agent	t,
Such change was authorized by resolution duly adopte authorized by the board, or the corporation has been no	d by its board of directors or by an of otified in writing of the change.	ficer so		
(Signature of an officer or director)	LARISSA RISSINE (PRESIDENT (Printed or typed name and title		CTOR	)
I hereby accept the appointment as registered agent an I further agree to comply with the provisions of all stat of my duties, and I am familiar with and accept the ob- document is being filed merely to reflect a change in the corporation has been notified in writing of this change	* -	=	rmand r, if th that th	ce iis ie
· L-Refin	10/18/2006			
(Signature of Registered Agent)	(Date)			
If signing on behalf of an entity:	•			
(Typed or Printed Name)				
* * * FILING F	EE: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)